

BETHEL HOME, INC.

225 NORTH EAGLE STREET

OSHKOSH

54902

Phone: (920) 235-4653

Operated from 1/1 To 12/31 Days of Operation: 365

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/03): 200

Total Licensed Bed Capacity (12/31/03): 200

Number of Residents on 12/31/03: 192

Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified?

Title 19 (Medicaid) Certified?

Average Daily Census:

Nonprofit Church

Skilled

Yes

Yes

Yes

191

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/03)				Length of Stay (12/31/03)		%	
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		16.7	
Supp. Home Care-Personal Care	No					1 - 4 Years		44.8	
Supp. Home Care-Household Services	No	Developmental Disabilities	0.5	Under 65	0.5	More Than 4 Years		21.4	
Day Services	No	Mental Illness (Org./Psy)	31.3	65 - 74	3.1				
Respite Care	No	Mental Illness (Other)	4.7	75 - 84	22.4			82.8	
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	64.1	*****			
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	7.8	95 & Over	9.9	Full-Time Equivalent			
Congregate Meals	Yes	Cancer	2.6			Nursing Staff per 100 Residents			
Home Delivered Meals	Yes	Fractures	3.1		100.0	(12/31/03)			
Other Meals	No	Cardiovascular	13.5	65 & Over	99.5				
Transportation	No	Cerebrovascular	9.4			RNs		12.5	
Referral Service	No	Diabetes	4.2	Gender	%	LPNs		5.7	
Other Services	Yes	Respiratory	5.2			Nursing Assistants,			
Provide Day Programming for		Other Medical Conditions	17.7	Male	19.3	Aides, & Orderlies			
Mentally Ill	No			Female	80.7				
Provide Day Programming for			100.0						
Developmentally Disabled	No				100.0				

Method of Reimbursement

Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care		Managed Care							
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	% Of All	
Int. Skilled Care	0	0.0	0	5	5.1	131	0	0.0	0	2	2.5	201	0	0.0	0	0	0.0	0	7	3.6	
Skilled Care	13	100.0	306	92	92.9	117	0	0.0	0	75	93.8	176	0	0.0	0	0	0.0	0	180	93.8	
Intermediate	---	---	---	2	2.0	97	0	0.0	0	3	3.8	160	0	0.0	0	0	0.0	0	5	2.6	
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Total	13	100.0		99	100.0		0	0.0		80	100.0		0	0.0		0	0.0		192	100.0	

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/03				
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Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total Number of
Private Home/No Home Health	5.2	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Residents
Private Home/With Home Health	0.0	Bathing	0.0	81.8	18.2	192
Other Nursing Homes	1.2	Dressing	7.3	81.3	11.5	192
Acute Care Hospitals	89.6	Transferring	19.8	49.0	31.3	192
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	17.7	54.7	27.6	192
Rehabilitation Hospitals	0.0	Eating	19.3	75.0	5.7	192
Other Locations	4.0	*****				
Total Number of Admissions	251	Continence	%	Special Treatments	%	
Percent Discharges To:		Indwelling Or External Catheter	6.3	Receiving Respiratory Care	8.9	
Private Home/No Home Health	42.1	Occ/Freq. Incontinent of Bladder	55.7	Receiving Tracheostomy Care	0.0	
Private Home/With Home Health	12.4	Occ/Freq. Incontinent of Bowel	26.6	Receiving Suctioning	0.0	
Other Nursing Homes	1.2			Receiving Ostomy Care	3.1	
Acute Care Hospitals	5.4	Mobility		Receiving Tube Feeding	2.1	
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	4.7	Receiving Mechanically Altered Diets	23.4	
Rehabilitation Hospitals	0.0					
Other Locations	10.7	Skin Care		Other Resident Characteristics		
Deaths	28.1	With Pressure Sores	3.1	Have Advance Directives	91.7	
Total Number of Discharges (Including Deaths)	242	With Rashes	16.7	Medications		
				Receiving Psychoactive Drugs	59.4	

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Nonprofit Peer Group %	Ratio	Bed Size: 200+ Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	95.5	92.0	1.04	95.6	1.00	88.1	1.08	87.4	1.09
Current Residents from In-County	97.9	85.9	1.14	82.0	1.19	82.1	1.19	76.7	1.28
Admissions from In-County, Still Residing	25.5	22.1	1.16	24.4	1.05	20.1	1.27	19.6	1.30
Admissions/Average Daily Census	131.4	138.9	0.95	101.2	1.30	155.7	0.84	141.3	0.93
Discharges/Average Daily Census	126.7	139.5	0.91	102.6	1.23	155.1	0.82	142.5	0.89
Discharges To Private Residence/Average Daily Census	69.1	64.3	1.07	45.6	1.52	68.7	1.01	61.6	1.12
Residents Receiving Skilled Care	97.4	96.1	1.01	87.0	1.12	94.0	1.04	88.1	1.11
Residents Aged 65 and Older	99.5	96.4	1.03	85.3	1.17	92.0	1.08	87.8	1.13
Title 19 (Medicaid) Funded Residents	51.6	55.4	0.93	71.8	0.72	61.7	0.84	65.9	0.78
Private Pay Funded Residents	41.7	32.6	1.28	17.8	2.34	23.7	1.76	21.0	1.99
Developmentally Disabled Residents	0.5	0.6	0.90	2.4	0.22	1.1	0.47	6.5	0.08
Mentally Ill Residents	35.9	36.2	0.99	40.0	0.90	35.8	1.00	33.6	1.07
General Medical Service Residents	17.7	24.3	0.73	31.6	0.56	23.1	0.77	20.6	0.86
Impaired ADL (Mean)	53.1	50.5	1.05	49.8	1.07	49.5	1.07	49.4	1.07
Psychological Problems	59.4	58.5	1.01	69.7	0.85	58.2	1.02	57.4	1.04
Nursing Care Required (Mean)	7.2	6.8	1.05	6.7	1.08	6.9	1.04	7.3	0.98